

CONFIDENTIALITY AGREEMENT

	SCHOOL/ORGANIZATION: TEST CENTER COORDINATOR: MAILING ADDRESS (for certificates): CITY, STATE, ZIP:	
	TELEPHONE:	EMAIL ADDRESS:
I, the undersigned, understand that all materials used for certification testing are proprietary and confidential. I hereby agree to maintain the confidentiality of all testing materials and understand that the security of testing materials is maintained by protecting all items from loss, unauthorized access, and reproduction. Furthermore, maintaining test item security prohibits any test site staff member from the following:		
	 unauthorized photocopying any test items or materials, selling or disclosing the content of test materials/test items to any person or organization, public or private, 	
	 removing test materials from the secure locations without authorization from the test site coordinator, 	
	 utilizing test items in any form, either from a copy of the test instrument or as a practice exercise to expose candidates to the test items, 	
	5. utilizing testing materials to generate another testing instrument for any purpose.	

Date

Print Name:

Print Name: _____

Test Center Coordinator Signature

Approved Testing Reader Signature

Approved Testing Reader Signature